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CONFIRMATION NO. 8870

<b>SERIAL NUMBER</b> 10/825,574	<b>FILING OR 371(c) DATE</b> 04/15/2004 <b>RULE</b>	<b>CLASS</b> 463	<b>GROUP ART UNIT</b> 3709	<b>ATTORNEY DOCKET NO.</b> N0189US
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CIP of 10/798,703 03/11/2004 and is a CIP of 10/798,531 03/11/2004  
 and is a CIP of 10/798,459 03/11/2004  
 and is a CIP of 10/798,632 03/11/2004 *Yes KH*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\****No KH***IF REQUIRED, FOREIGN FILING LICENSE GRANTED****\*\* 06/25/2004**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> IL	<b>SHEETS DRAWING</b> 8	<b>TOTAL CLAIMS</b> 23	<b>INDEPENDENT CLAIMS</b> 2
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met				
Verified and Acknowledged <i>Allowance</i> Examiner's Signature <i>KH</i> Initials				

**ADDRESS**

37583

**TITLE**

Method for comparing performances on remotely located courses

<b>FILING FEE RECEIVED</b> 824	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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